PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10717224

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL E									
TOTAL CLAIMS			42		·		Γ	RATE.	FEE		RATE	FEE								
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	385.00	OR	BASIC FEE	770.00								
TOTAL CHARGEABLE CLAIMS			42 minus 20=		. 22			X\$ 9=	198	OR	X\$18=									
IND	EPENDENT CL	AIMS	2 mir	nus 3 =	• Ø		I	X43=		OR	X86=									
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT					+145=		OR	+290=									
* If the difference in column 1 is less than zero, enter "0" in column 2							-	TOTAL	583	OR	TOTAL									
CLAIMS AS AMENDED - PART II								SMALL E	NTITY	OR	OTHER SMALL E									
		(Column 1) CLAIMS		(Colur		(Column 3)	È			· · ·		ADDI-								
AMENDMENT A	4/6/07	REMAINING AFTER AMENDMENT	42	NUM PREVK PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE								
	Total	. 42	Minus	4	2	=		X\$ 9=		OR	X\$18=									
	Independent	• 2	Minus	***	2-	=		X43=		OR	X86=									
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	ENDEN	CLAIM		Γ	+145=		OR	+290=									
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE									
(Column 1) (Column 2) (Column 3)																				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE								
	Total	*	Minus	trit		=		X\$ 9=		OR	X\$18=									
	Independent	*	Minus	***	- 01 4114			X43=		OR	X86=									
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDEN	CLAIM			+145=		OR	+290=									
								TOTAL		OR	TOTAL ADDIT. FEE									
(Column 1) (Column 2) (Column 3)																				
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE								
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=									
	Independent	*	Minus	***	-		T	X43=		OR	X86=									
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=									
•	If the entry in colu	mn 1 is less than t mber Previously P	ne entry in colu	mn 2, writ S SPACE	te "0" in co	olumn 3. an 20, enter "20."		TOTAL	•	OR	TOTAL ADDIT. FEE									
-	of the "Highest No.	mhor Provincely P	aid For IN TH	S SPACE	is less tha	an 3. enter "3."			** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE											